

+

<b>UTILITY PATENT APPLICATION TRANSMITTAL</b> <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>		Attorney Docket No.	00684.002979.1	
		First Named Inventor or Application Identifier		
		Eiichi MURAKAMI		
		Express Mail Label No.		

**APPLICATION ELEMENTS**

*See MPEP chapter 600 concerning utility patent application contents.*

**ADDRESS TO:**

Mail Stop Patent Application  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

<div style="display: flex; justify-content: space-between;"><div style="width: 45%;"><p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (Submit an original, and a duplicate for fee processing)</p><p>2. <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p><p>3. <input checked="" type="checkbox"/> Specification <span style="float: right;">Total Pages <input type="text" value="30"/></span></p><p>4. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) <span style="float: right;">Total Sheets <input type="text" value="5"/></span></p><p>5. <input checked="" type="checkbox"/> Oath or Declaration <span style="float: right;">Total Pages <input type="text" value="2"/></span></p><div style="margin-left: 20px;"><p>a. <input type="checkbox"/> Newly executed (original or copy)</p><p>b. <input checked="" type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 17 completed)</p><div style="margin-left: 20px;"><p>i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> Signed Statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</p></div></div></div><div style="width: 55%; vertical-align: top; padding: 5px;"><p>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)</p><p>8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)</p><div style="margin-left: 20px;"><p>a. <input type="checkbox"/> Computer Readable Form (CRF)</p><p>b. Specification Sequence Listing on:</p><div style="margin-left: 20px;"><p>i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or</p><p>ii. <input type="checkbox"/> paper</p><p>c. <input type="checkbox"/> Statements verifying identity of above copies</p></div></div></div></div>	<p style="text-align: center;"><b>ACCOMPANYING APPLICATION PARTS</b></p> <p>9. <input type="checkbox"/> Assignment Papers (cover sheet &amp; document(s))</p> <p>10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <span style="float: right;"><input type="checkbox"/> Power of Attorney</span> (when there is an assignee)</p> <p>11. <input type="checkbox"/> English Translation Document (if applicable)</p> <p>12. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <span style="float: right;"><input checked="" type="checkbox"/> Copies of IDS Citations</span></p> <p>13. <input checked="" type="checkbox"/> Preliminary Amendment</p> <p>14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)</p> <p>15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)</p> <p>16. <input type="checkbox"/> Other: _____</p>
--	---

17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:

☐ Continuation

*Prior application information:*

☒ Divisional

*Examiner R.E. Fuller*

☐ Continuation-in-part (CIP) of prior application No. 09/533,377, filed March 22, 2000

*Group/Art Unit: 2851*

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

<b>18. CORRESPONDENCE ADDRESS</b>					
<input checked="" type="checkbox"/> Customer Number or Bar Code Label		<b>05514</b> <small>(Insert Customer No. or Attach bar code label here)</small>		or <input type="checkbox"/> Correspondence address below	
NAME					
Address					
City	State	Zip Code			
Country	Telephone	Fax			

03914 U.S. PTO  
10/642699  
08/19/03



CLAIMS	(1) FOR	(2) NUMBER FILED	(3) NUMBER EXTRA	(4) RATE	(5) CALCULATIONS
	TOTAL CLAIMS (37 CFR 1.16(c))	20-20 =	0	X \$ 18.00 =	\$0.00
	INDEPENDENT CLAIMS (37 CFR 1.16(b))	1-3 =	0	X \$ 84.00 =	\$0.00
	MULTIPLE DEPENDENT CLAIMS (if applicable) (37 CFR 1.16(d))			\$280.00 =	\$0.00
				BASIC FEE (37 CFR 1.16(a))	\$750.00
			Total of above Calculations =		\$750.00
	Reduction by 50% for filing by small entity (Note 37 CFR 1.9, 1.27, 1.28).				
	TOTAL =				\$750.00

19. Small entity status

- a. ☐ A small entity statement is enclosed
- b. ☐ A small entity statement was filed in the prior nonprovisional application and such status is still proper and desired.
- c. ☐ Is no longer claimed.

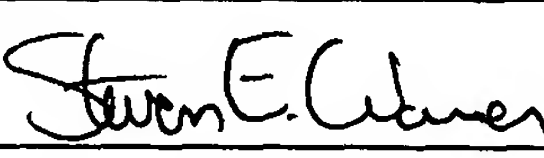
20. ☒ A check in the amount of \$750.00 to cover the filing fee is enclosed.

21. ☐ A check in the amount of \$ \_\_\_\_\_ to cover the recordal fee is enclosed.

22. The Commissioner is hereby authorized to credit overpayments or charge the following fees to Deposit Account No. 06-1205:

- a. ☒ Fees required under 37 CFR 1.16.
- b. ☒ Fees required under 37 CFR 1.17.
- c. ☐ Fees required under 37 CFR 1.18.

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED**

NAME	Steven E. Warner
SIGNATURE	
DATE	August 19, 2003